

FIG. 1

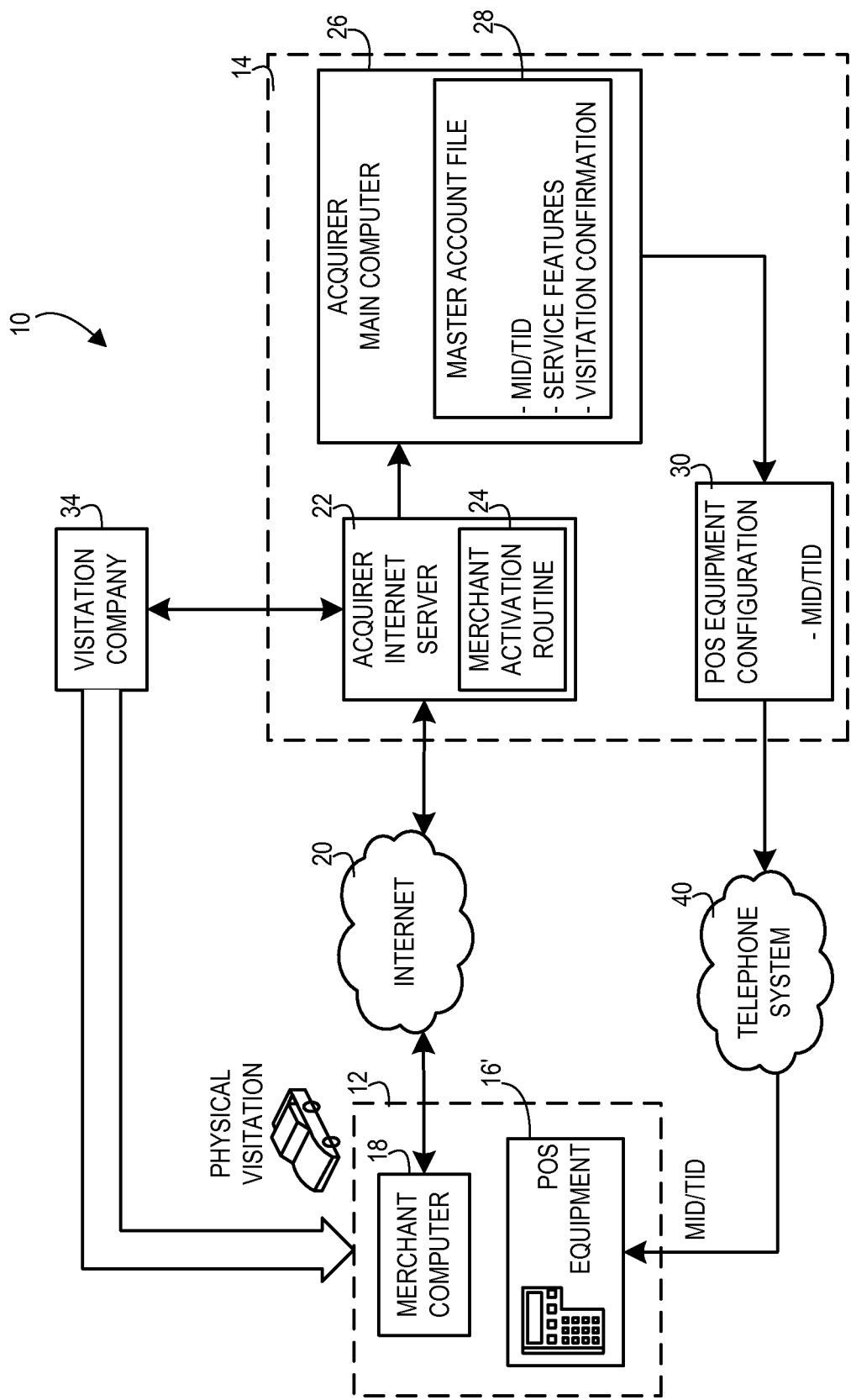
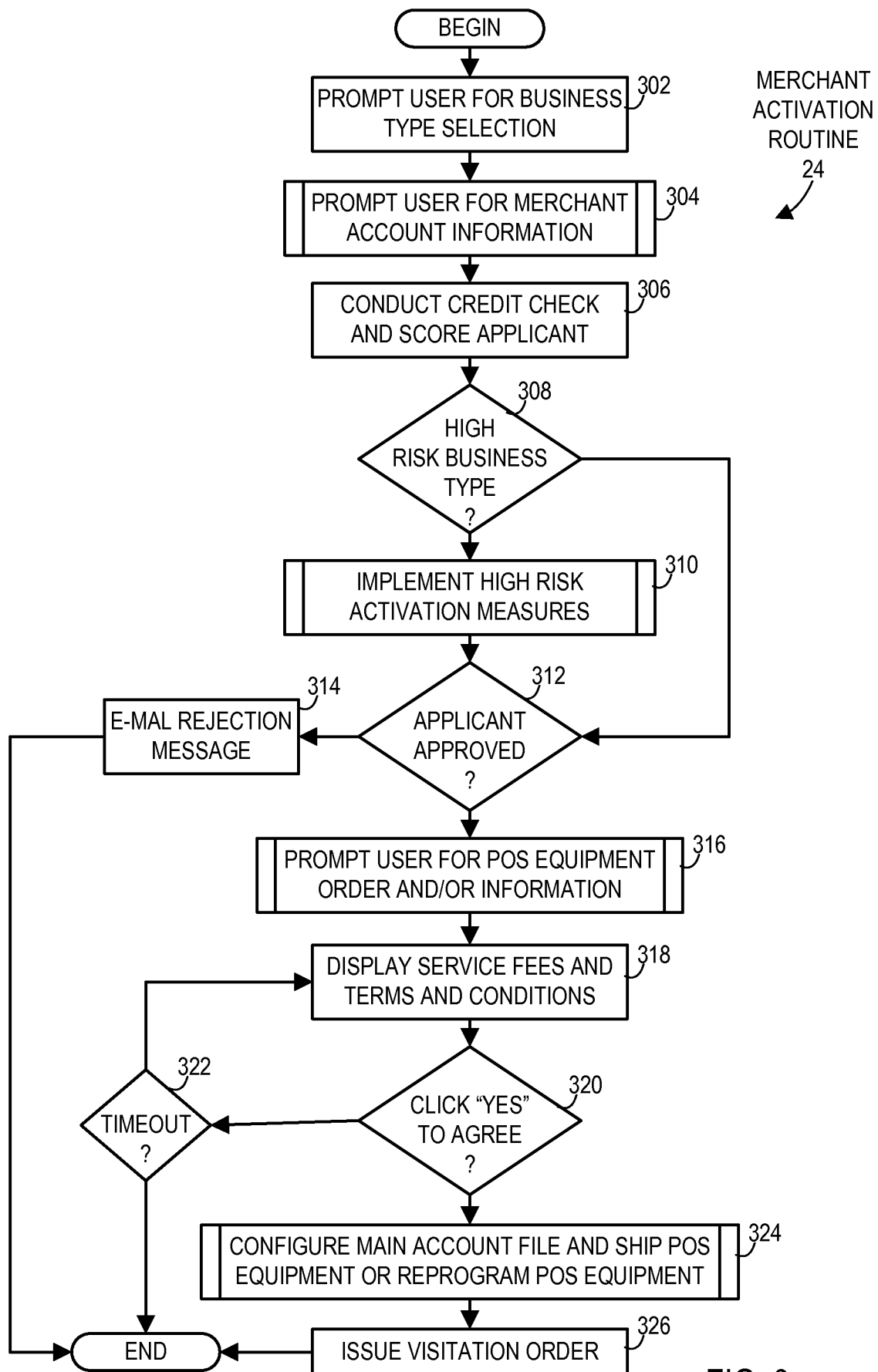


FIG. 2



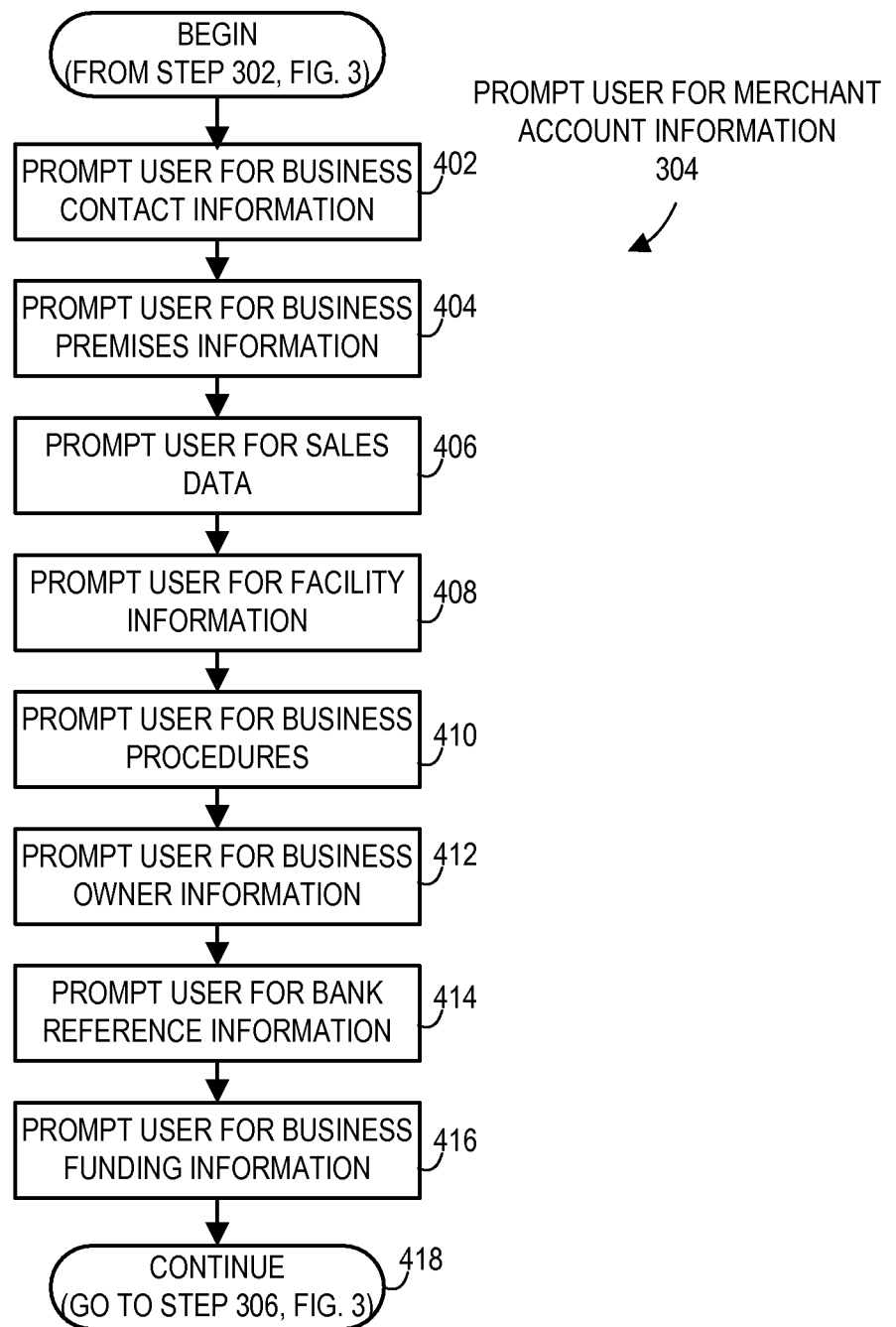


FIG. 4

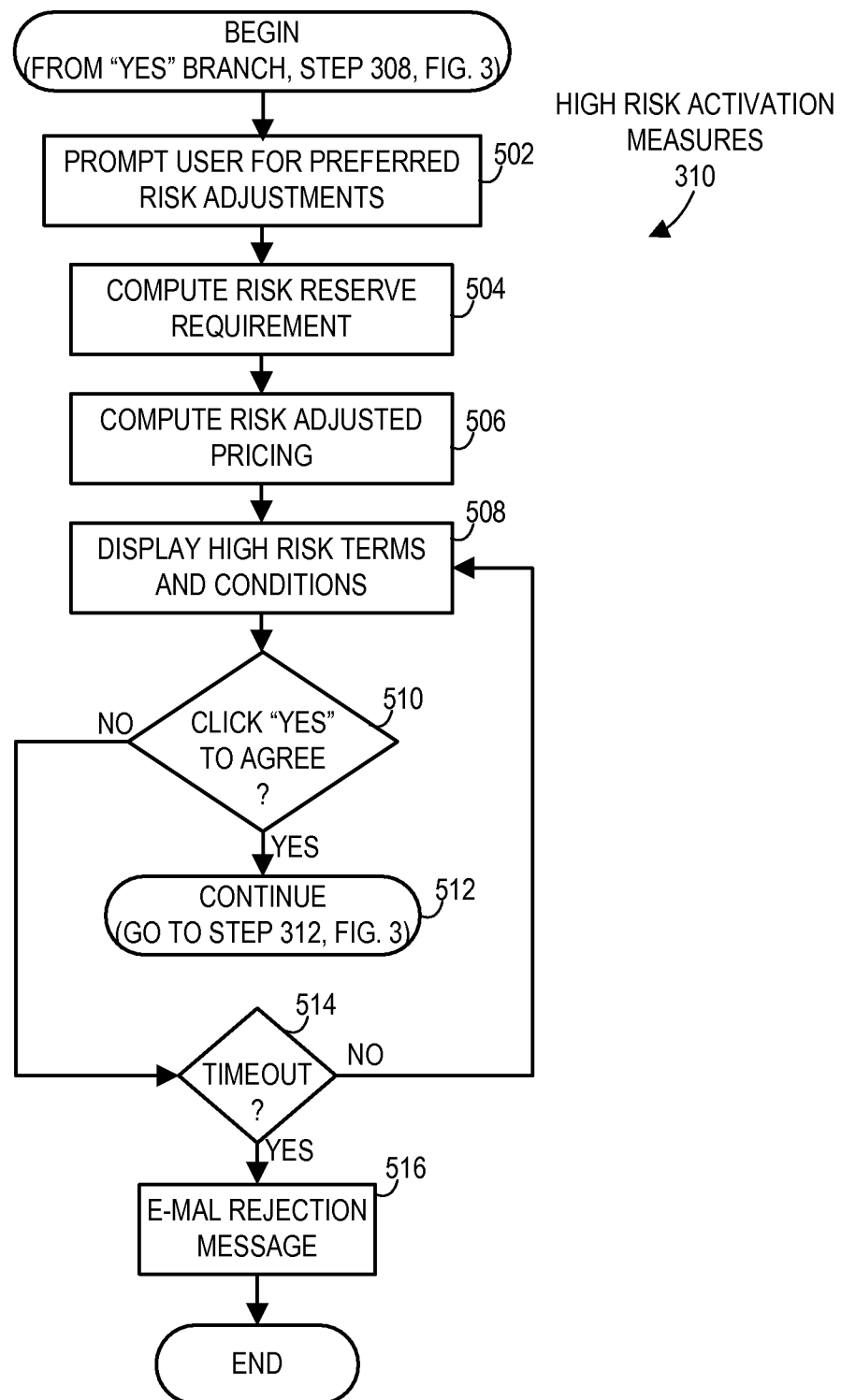
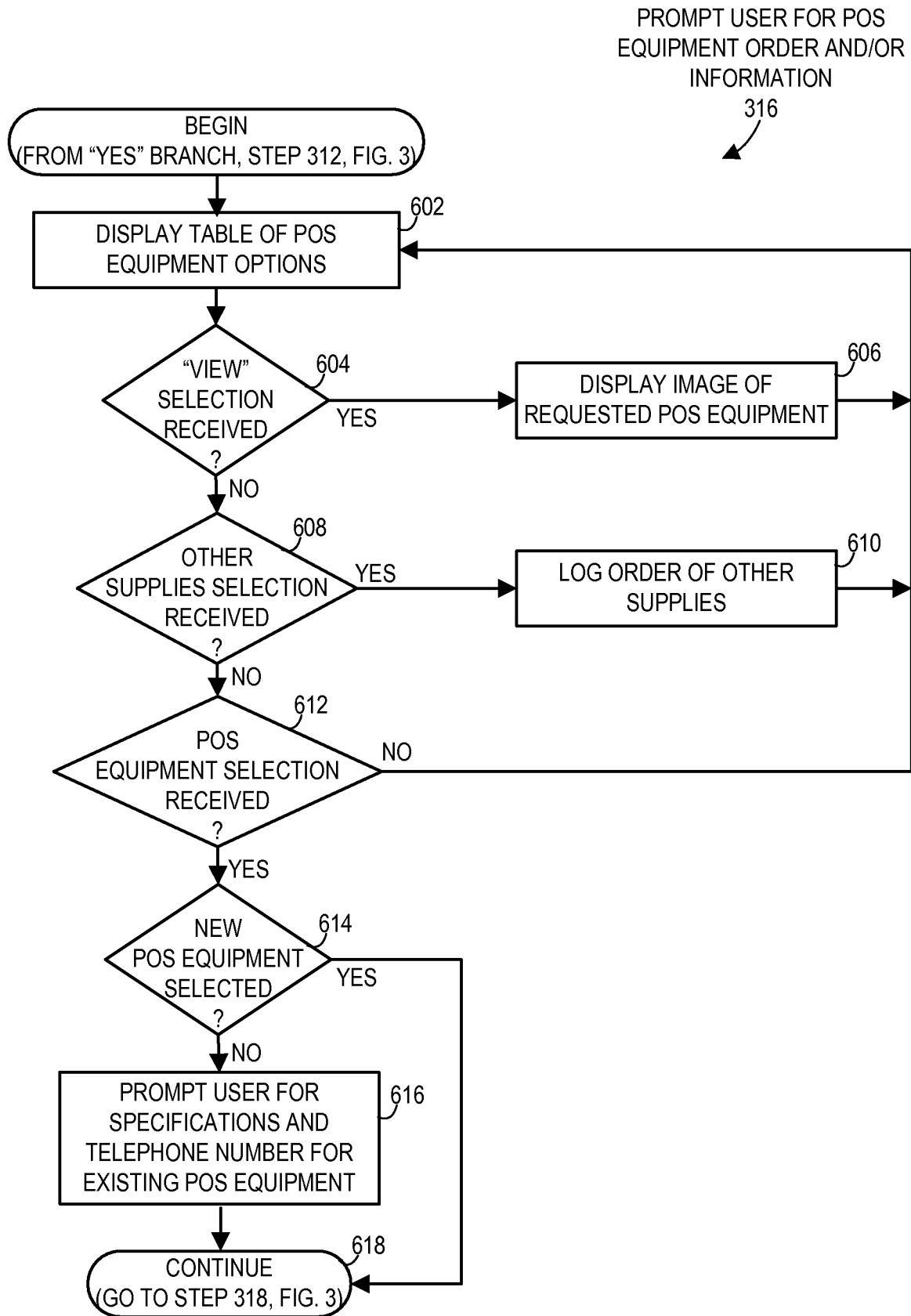


FIG. 5



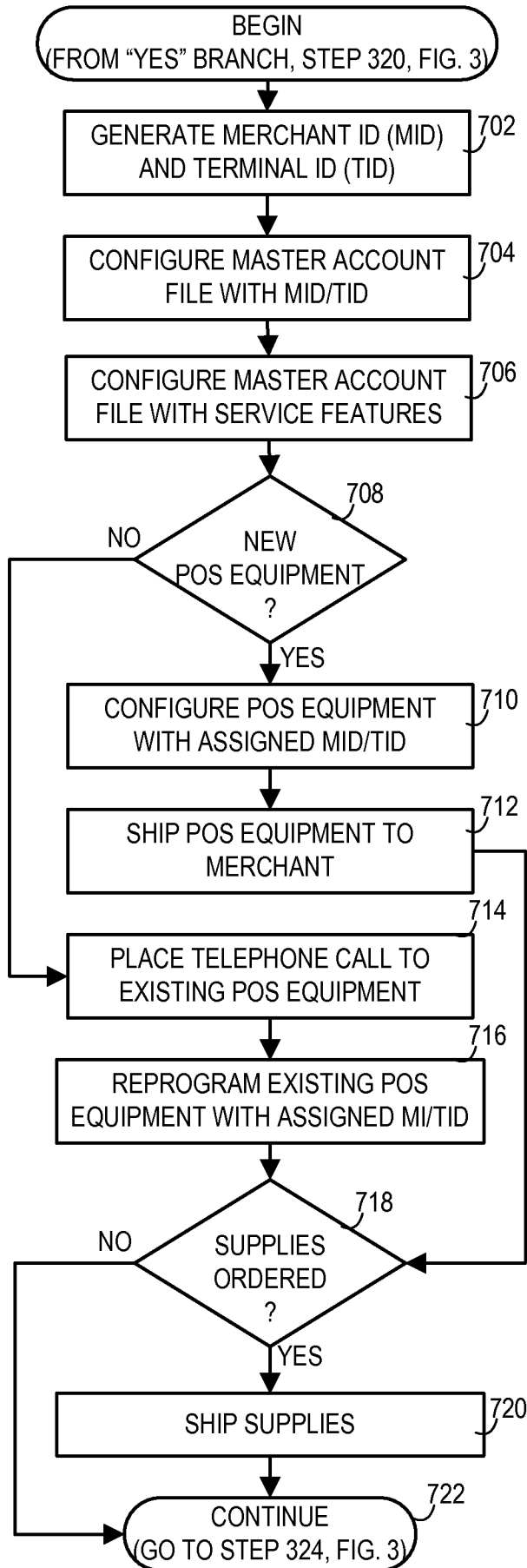


FIG. 7

Congratulations !

If you have recently opened your business or have decided it's time to review your credit card processing arrangements, you've come to the right place. With Express Merchant Processing Solutions™, you can complete this on-line application in 15 minutes! If you need equipment, leasing options are available for point o sale terminals as well. If you already own a terminal, we'll set-up your current equipment* at n additional cost.

It's simple and it's secure: all of your application information is encrypted. You can be approved and ready to process credit cards in as little as two to tree business days!

If your business can be categorized as one of the following business types**, then [click here](#) to learn more!

806

- Furniture Stores and/or
- Floor Covering
- Mail order/Telephone Order oriented business
- Internet and/or e-commerce business
- Electronics and/or Computer Stores
- Travel Agencies and/or Reservation Services
- Membership and/or Subscription businesses

Before you begin, please make sure you have the following information nearby to complete the application:

- Business contact information
- Federal tax ID number (or Social Security # if not incorporated)
- Current credit card processor contact info (if applicable)
- Business owner and bank reference information
- Funding information (bank routing numbers for your business's checking account)

802

804

* If your terminal equipment is not listed in the "Order Equipment" section, you will have to either choose to lease from the listed options or call 877-590-899 for further information

** If your business can be categorized as one of the listed types, submitting this application will terminate any resulting merchant agreement and may result in a change to shown "Service Fees."

FIG. 8

900

Conditions...

In order to proceed with his online application, you must meet these requirements and conditions:

YOU MUST:

- Be at least 18 years of age
- Have a checking account used primarily for business for your credit card
- sales credits
- Be an officer of the business establishment and/or authorized to act on behalf of the company
- Be of one of the following business type... If you're not, then click here.
920
 - Restaurant or Food Store
 - Retailer of Clothing - Men's, Women's, Children's, etc....
 - Retailer of low-end Jewelry – Watches, trinkets, etc....
 - Professional Services – Doctor, Physician, Veterinarian, or Legal Services
 - Miscellaneous Retail or Repair
 - Barber or Beauty shop

908
Merchants with large Visa/MasterCard volumes, click here!

Review what you will need to complete the application in more detail.
910

902 Continue 904 Cancel

FIG. 9

1000

Step 1 of 6: Enter General Information

Please note that fields marked with an asterisk(*) are required.

Business Contact :

* Business DBA Name: 1002 Legal Business Name: 1004
Name:

* Address: Street Address: (No PO Boxes Plase) 1006

 City: 1008 State: 1010 Zip: 1012

* Authorized Signer: Signer (Name of Contracting Person): Title: 1016
 1014 1016

*Telephone: (9999999999) 1018
Fax Number: (9999999999) 1020

*Attention to: 1022

Email Address: 1024

WEB Store Address: 1026

*Type of Business: 1028

*Business Category: 1030

FIG. 10

1100

Business Premises :

* Zone: 1102

* Location: 1104

* Type of
Ownership: 1106

*State
Incorporated: 1108

*Federal tax ID
(or Social Security if not
incorporated): 1110 (9999999999)

*Date Business
Began: 1112 (MM/YYYY)

Number of
Employees: 1114

*What does
Your business sell? 1116

FIG. 11

1200

Sales Data :	
* Total cash and Credit sales:	\$ <input type="text" value="Business District"/> ,000.00 ¹²⁰²
* Sales tax:	<input type="text" value="Mail"/> % ¹²⁰⁴
Refund policies For MC/Visa: (if applicable)	<input type="checkbox"/> Exchange <input type="checkbox"/> Store Credit <input checked="" type="checkbox"/> Refund with <input type="text" value="0-3 Days"/> ¹²⁰⁸ to submission ¹²⁰⁶
*MC/Visa sales are submitted at:	<input type="text" value="Date of Order"/> ¹²¹⁰
*Annual MC/Visa Sales:	\$ <input type="text"/> ,000 ¹²¹²
*Average Sale Amount:	\$ <input type="text"/> ¹²¹⁴

FIG. 12

1300

Facility Information :	
Advertising Name Display:	<input type="checkbox"/> Window <input type="checkbox"/> Door <input type="checkbox"/> Store Front ¹³⁰²
* Store Located On?	One must be chosen: <input checked="" type="radio"/> Ground Floor <input type="radio"/> Other ¹³⁰⁴
*Facility Square Footage?	<input type="text" value="0-3 Days"/> ¹³⁰⁶

FIG. 13

1400

Business Procedures :			
* What % of your sales are from:	In Store	100	% 1402
	Mail order/Telephone order	0	% 1404
	Internet	0	% 1406
	TOTAL	100	%
*Products are delivered in:	0-7 days	100	% 1408
	8-14 days	0	% 1410
	15-30 days	0	% 1412
	30+ days	0	% 1414
	TOTAL	100	%
How do you Advertise?	<input checked="" type="checkbox"/> Brochure/Mail <input type="checkbox"/> Catalog <input type="checkbox"/> TV/Radio <input type="checkbox"/> Newspaper/Magazine		
Do you currently accept credit cards?	If so, please provide the information below on your current processor: Current Processor Name: 1418 <input style="width: 100%;" type="text"/> Phone Number: 1420 <input style="width: 100%;" type="text"/> (9999999999)		
Please use these Navigation Buttons to complete the application steps...			
1 General Info	2 Business Reference	3 Funding Info	4 Chose Processing Type
5 Order Equipment		6 Service Fees	Submit Cancel

1422

FIG. 14

1500

Step 2 of 6: Enter Owner and Reference Information

Please provide the following information regarding the Owner(s), Partner(s), or Officer(s) of your business. This information is mandatory, even if it is the same as previously provided information. Field marked with an asterisk (*) are required. If you are not sure of the exact numbers requested in the Bank Reference section, please estimate.

First Owner / Partner / Officer :

* Name: First Name: 1502 Middle: 1504 Last Name: 1506
 * Address: Street Address: 1508
 City: 1510 State: 1512 Zip: 1514
 * Title: Owner 1516
 * Telephone: (9999999999) 1518
 * Social Security Number: (9999999999) 1520

Second Owner / Partner / Officer :

* Name: First Name: 1522 Middle: 1524 Last Name: 1526
 * Address: Street Address: 1528
 City: 1530 State: 1532 Zip: 1534
 * Title: Partner 1536
 * Telephone: (9999999999) 1538
 * Social Security Number: (9999999999) 1540

FIG. 15

1600

Bank Reference Information – Please estimate if necessary

*Bank Name:

* Address: Street Address:

City: State: Zip:

*Telephone: (9999999999)

*Contact Name:

*Date Relationship Opened: (MM/YYYY)


*Are you a Borrower: ☒ Yes ☐ No

*Average Balance: \$,000.00

*Total Loans/Credit Facilities: \$,000.00

*Total Other Business /
Personal Account Balances: \$,000.00

FIG. 16

 1700

Step 3 of 6: Enter Founding Information

The Demand Deposit Account (DDA) and American Banker's Association (ABA) numbers are extremely important for the funding of your credit card transactions. This information directs the funds to your bank an business checking account. Express Merchant Processing Solutions™ will credit your business checking account for submitted sales transactions and/or debit the account for chargebacks and other fees (when applicable). Both fields below are required.

Please refer to checks for your business checking account. The DDA and ABA numbers are located on the lower left corner of the checks.

* ABA Number: (for example: 044000037)

* DDA Number: (for example: 0000000000)

Here is an example:

I:044000037I: 0000000001 0151
ABA Number DDA Number

Please double check your entries before you proceed. The accuracy of these numbers is extremely important to ensure that you receive your funding correctly.

FIG. 17

1800

Step 4 of 6: Choose Processing Types

Choose the card types you would like to accept at your business. MasterCard® and Visa® assumed and automatically setup.

1802 ☒ MasterCard®

1804 ☒ Visa®

1806 ☐ American Express®

1816 ☐ I do not have an American Express number and need to apply for one.

1818 ☐ I do have an existing American Express Number and it is _____ 1820

1808 ☐ Discover®

I have an existing Account Number and it is _____ 1822

1810 ☐ Diner's Cub®

1812 ☐ JCB®

1814 ☐ Debit® - you must have a debit capable terminal and pinpad!

Please use these Navigation Buttons to complete the application steps...

1 General Info	2 Business Reference	3 Funding Info	4 Chose Processing Type	5 Order Equipment	6 Service Fees	Submit	Cancel
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1824

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FIG. 18

1900

Step 5 of 6: Equipment Selection and Fees

All of the following equipment options are recommended for retail and restaurant establishments. If you have elected to accept debit transactions, please ensure that you select an equipment package that is inclusive of a pinpad. Also, don't forget to purchase an imprinter! If you have any question, please contact a representative to inquire about our terminal options

☒ Lease
 ☐ Customer Owned

1902

1922

	Select	Package Description	Images	Lease Price	Lease (36 Months)	Customer Owned	Debit
1904	<input type="radio"/>	T7P	VIEW	\$35.99	✓	✓	NO
1906	<input type="radio"/>	T7P/S7CR	VIEW	\$51.99	✓	✓	✓
1908	<input type="radio"/>	Omni 396/P350	VIEW	\$35.99	✓	✓	NO
1910	<input type="radio"/>	Omni 396/P350/P1000	VIEW	\$47.99	✓	✓	✓
1912	<input type="radio"/>	T77	VIEW	\$35.99	✓	✓	NO
1914	<input type="radio"/>	T77/S7CR	VIEW	\$51.99	✓	✓	✓
1916	<input type="radio"/>	Tranz330/P250	VIEW	N/A	NO	✓	NO
1918	<input type="radio"/>	Tranz330/P250/P1000	VIEW	N/A	NO	✓	✓

1924

	Select	Additional Equipment	Images	Cost
1920	<input checked="" type="checkbox"/>	Imprinter	VIEW	\$35.00

Please use these Navigation Buttons to complete the application steps...

1 General Info	2 Business Reference	3 Funding Info	4 Chose Processing Type	5 Order Equipment	6 Service Fees	Submit	Cancel
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1926

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FIG. 19

2000

Step 6 of 6: Service Fees

2002

<u>CARD TYPE</u>	<u>RATE</u>
MasterCard	****
Visa	****
Diner's Club (Lic)	2.80

2004

<u>TRANSACTION DESCRIPTION</u>	<u>AMOUNT</u>
MC SALE TRANSACTION	0.26
VISA SALE TRANSACTION	0.26
MC VOICE AUTH	0.65
VISA VOICE AUTH	0.65
DINERS LOCAL AUTH	0.15
DINERS WATS AUTH	0.15
DINERS EDC CAPT	0.00
DEB/ATM TRAN FEE	0.20
MC FOREIGN HANDLING	0.01
VISA FOREIGN HANDLING	0.01
MIN PROCESSING FEE	25.00
CHARGEBACK FEE	15.00
MONTHLY SERVICE FEE	10.00
ACH REJECT FEE	10.00
SET UP FEE	39.95
DEBIT INTERCHANGE	0.00

Please use these Navigation Buttons to complete the application steps...

2006

1 General Info	2 Business Reference	3 Funding Info	4 Chose Processing Type	5 Order Equipment	6 Service Fees	S ubmit	C ancel
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2008

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FIG. 20

Summary of Terms and Agreement

From time to time you may have questions regarding the contents of your processing agreement with us. The following information summarize portions of the Agreement in order to assist you in answering some of the questions we are most commonly asked:

Certain terms of the Agreement such as pricing, are dependent upon the information you have provided and certain assumptions regarding your business and bankcard processing. Accuracy of the MasterCard/Visa volume and average sale amount indicated on the application is also an important component of servicing your account. The price charged may be changed retroactively in the event the information or assumptions are incorrect or there is a change in your business. If you are billed back for such an increase in price you may be charged an additional amount with regard to each transaction processed at the incorrect price.

We may debit your bank account from time to time for amount owed to us under the Agreement.

Funding for your Card transactions which are settled by us, will be initiated one business day after your submission of the transactions for processing.

The account you designate as your settlement account must be a demand deposit account that is primary used for business purpose.

There are many reasons why a Chargeback may occur. When they occur we will debit your settlement funds of settlement account. For a more detailed discussion regarding Chargeback see Section 6 of the Agreement.

If you dispute any charge or funding, you must notify us within 45 days of the date of the statement where the charge or funding appears.

The Agreement limits our liability to you. For a detailed description of the limitation of liability see Section 7 of the Agreement.

We have assumed certain risk by agreeing to provide you with bankcard processing. Accordingly, we may take certain actions to mitigate our risk, including termination of the Agreement or establishment of a reserve account under certain circumstances. In addition, actual sales deposits materially greater than estimates provided by you result in funding delays and/or additional information requirements to support a reevaluation of your account.

By executing the Agreement with us, you are authorizing us to obtain financial and credit information regarding you and your business throughout the term of the Agreement.

The Agreement contains a provision that in the event you terminate the Agreement early, you will be responsible for he payment of and early termination fee.

We hope that the above information is helpful to you. Of course, in the even any of the above information conflicts with the Agreement, the terms of the Agreement will control.

View the [Merchant Services Bankcard Agreement](#).

Personal Guaranty

In exchange for The Northern Trust Company and First Data Merchant Services' acceptance of this Agreement, the individual entering this Agreement on behalf of CUSTOMER unconditionally guarantees performances of CUSTOMER's obligations under this Agreement and payment of all sums due hereunder. This is a Guaranty of payment and not of collection and The North Trust Company and First Data Merchant Services are relying upon this Guaranty in entering this